





## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

				Page 1 of 2 PD-970567		
				X Original ☐ Continuation		
				☐ Division ☐ Continuation-		
				in-part		
	As a below named inventor, I hereby declare that:			☐ Supplemental		
	My residence, post office address and citizenship are as stated below next to my name.					
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled					
The Hand with the term the term the term the term and the term that the term the		System and Method	for Multicasting Multimedia Conte	ent		
	the specification of which	ch				
	(check one)	is attached hereto.				
	X	was filed on October supplemental] was	27, 1997 as Application Serial No. 6 amended on or (b) [supplemental	60/063,692 and (a) [other than with amendments through		
	I hereby state that I have reviewed and understand the contents of the above identified specification, including the					
	I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.					
	I hereby claim foreign priority benefits under Title 35, United States Code, §119(a) through §119(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:					
	Prior Foreign Application(s)					
			·	Priority Claimed		
	Number	Country	Day/Month/Year Filed	Yes X No		
	I hereby claim priority benefits under Title 35, United States Code, §119(e) of any U.S. Provisional application(s) for patent or inventor's certificate listed below and have also identified below any application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:					
	Prior Provisional Application(s)					
	_60/063,692	U.S	27/10/97	Priority Claimed X Yes No		
	Number	Country	Day/Month/Year Filed			



I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status (patented, pending, abanc	oned)			
hereby appoint the following attorner business in the Patent and Trademark	ys, or agent and attorneys, to Office connected therewith:	prosecute this application	on and to transact all			
John T. Whelan, Michael W. Sales,	Registration No. 32,448 Registration No. 30,213.					
Address all telephone calls to John T.	Whelan at (301) 428-7172.					
Address all correspondence to Patent Records Administration, Hughes Electronics Corporation, Bldg. 001/A109 P.O. Box 956, El Segundo, California 90245-0956						
I hereby declare that all statements n information and belief are believed to willful false statements and the like so Title 18 of the United States Code an any patent issued thereon.	be true; and further that these	or imprisonment, or both.	under Section 1001 of			
FULL NAME OF SOLE OR JOINT INVENTOR Douglas M. Dillon	INVENTOR'S SIGNATURE	Nh.	DATE 3/27/98			
RESIDENCE (CITY AND STATE) Gaithersburg, Maryland		CITIZENS U.S.	HIP			
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FULL NAME OF SOLE OR JOINT INVENTOR			DATE			
RESIDENCE (CITY AND STATE)		CITIZEN	SHIP			
POST OFFICE ADDRESS						
FULL NAME OF SOLE OR JOINT INVENTOR	R INVENTOR'S SIGNATURE		DATE			
RESIDENCE (CITY AND STATE)		CITIZEN	SHIP			
POST OFFICE ADDRESS						
FULL NAME OF SOLE OR JOINT INVENTO	R INVENTOR'S SIGNATURE		DATE			
RESIDENCE (CITY AND STATE)	G,	CITIZEN	ISHIP			